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2006 APR -5 PM 2:57

cardica

US PATENT & TRADEMARK  
OFFICE

Cardica, Inc. 1500-5501 Bay Dr., Redwood City, CA 94063

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US PATENT & TRADEMARK  
OFFICE**FAX**

To: Office of Finance - Refund Branch

Mail Stop 16

From: Brian Schar

Fax: (571) 273-6500

Total Pages: 1

Phone: (571) 272-6500

Date: April 4, 2006

Re: Refund Request - 10/810,170

CC:

A petition to withdraw the holding of abandonment in this application under 37 CFR 1.181(a) was filed in this application on February 14, 2006, pursuant to MPEP 711.03(c)(1). According to that section of the MPEP, "a petition under 37 CFR 1.181(a) requesting withdrawal of the holding of abandonment is the appropriate course of action, and such petition does not require a fee." (emphasis added).

However, on February 16, 2006, Assignee's deposit account no. 502108 was charged \$750.00, identified as fee code 2453. Fee code 2453 is associated with the petition to revive an unintentionally abandoned application under 37 CFR 1.137(b). That is a different petition than the one filed in the case under 37 CFR 1.181(a). The charge of February 16, 2006 in this case was in error, and we request a refund of the erroneously charged \$750.00 to our deposit account 502108.

Thank you for your help. Please contact me at (650) 331-7162 if you have any questions.

Sincerely,

Brian Schar  
Reg. No. 45,076

Adjustment date: 08/03/2006 CKHLDK  
02/16/2006 AWONDAF1 00000018-502108 10810170  
01 FC:2453 750.00 CR

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 18-2-06 2 Serial/Patent # 16/810170

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition		<u>2-14-06</u>	\$ <u>2750</u>
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$

7 TOTAL AMOUNT OF REFUND \$ 750

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

50-2108

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

*Petition 118160, no fee required.*

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Karen Creasy

TITLE: Petr. Ex. Mr.

SIGNATURE: Karen Creasy

PHONE: 23208

OFFICE: DP

\*\*\*\*\* THIS SPACE RESERVED FOR FINANCE USE ONLY: \*\*\*\*\*

APPROVED: OK

DATE: 8/3/06

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B